PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
	PATENT	RD	-				٠.							
		· · · · · · · · · · · · · · · · · · ·	tive Janua					10-67-789						
	•	CLAIMS A	S FILED - PART I (Column 1) (Colu			~~ a\	SMALL ENT			NTITY		OTHER		
TOTAL CLAIMS			Colorin	111	(COR	(Column 2)			RATE FEE		OR 1	SMALL		
FC			LUMARER		A IZ +BAS	NUMBER EXTRA				FEE	-	RATE	FEE	
			NUMBER FILED		NOWL	NOWBEREXTRA				375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			(1) minus 20=		* ~			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			1 , 0 , _ , 	inus 3 =		5			X42=		OR	X8 ∛ =	H30.9	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=			OR	+280≃		
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTA		· · · · · ·	1 1	TOTAL	HAD	
1.	C		1017			Un	OTHER	THAN						
9-17-04 (Column 1)			MENDED - PART II (Column 2) (Column 3)					SMALL ENTITY			OR	SMALL		
⋖		CLAIMS REMAINING		HIGHI NUME	EST	PRESENT			Ì	ADDI-	1	· _	ADDI-	
AMENDMENT A		AFTER AMENDMENT		PREVIO		EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	• 50	Minus	20	5_	=		X\$ 9:	=		OR	X\$18=		
	Independent	· 8	Minus	***	8	=		X42=			OR	X84=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM	,		- 40				200		
								+140=			OR	+280=		
	· · · · · · · · · · · · · · · · · · ·						P	TOT. DDIT. FI			OR ,	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)	l r		· · ·				·	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
				PAID F		EXIIVA				FEE			FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18≃		
AME	Independent	*	Minus	***	C: 414.6	= []		X42=			OR	X84=		
	FIHOI PRESE	NTATION OF MU	JUIPLE DEF	PENDENT	CLAIM		 	+140=	1			+280≠		
							L	+140=	L		OR	+280± TOTAL		
		Α	DDIT. FE			OR ,	ODIT. FEE							
		(Column 1) CLAIMS		(Colum		(Column 3)					•	· .		
5 l		REMAINING AFTER		NUMB	BER	PRESENT EXTRA		RATE	1	ADDI- TIONAL	- 1	RATE	ADDI- TIONAL	
		AMENDMENT		PAID F				11/11/2	1	FEE	1	חאור	FEE	
	Total	*	Minus :	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***				X42=	1		OR	X84=		
لــَــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		t			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=		
** \$	f the "Highest Nun	mber Previously Pa mber Previously Pa	aid For" IN THIS	S SPACE is	less than	n 20, enter "20."	AI	TOTA DDIT. FE		البسيد	OR A	TOTAL DOIT. FEE		
1	he "Highest Num	ber Previously Paid	d For" (Total or	Independer	nt) is the	highest number	r foun	d in the a	вррі	ropriate box	in colu	mn 1.		
	•												1	